POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under

37 CFR 3 73/h)

67 GT (C.7 G(D).							
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			72058				
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Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
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		95110-2704					
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SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature		icia +	7	Di	Date 5/15/2009		
Name	Teffery	-Jeffery Scott Heileson,	Reg. No. 46,765	Т	elephone 408-	536-2282	
Title	itle Patent Attorney						
This collection	on of information	is required by 37 CFR 1.31, 1.32 and 1	33 The information	is required to obtain or retain	n a henefit by the public	s which is to file (and	

This collection of information is required by 37 CFR 13.1, 132 and 133. The information is required to obtain or retain a benefit by the upon by the USPTO to process an application. Confidentiality is gowered by 36 USC, 122 and 37 CFR 111 and 114. This concident is estimated to the 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or supplections for reducing this burden, should be sent to the Child retains Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Mexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SERD TO: Commission of Port Partner, P.O. Box 1450, Mexandria, VA 22313-1450.

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